CLEMENT MANOR HLTH CARE CENTER

3939 S 92ND ST

GREENFIELD 53228	, , ,		Ownership:	Nonprofit Church
Operated from 1/1 To 12/31	Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with I	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Sta	affed (12/31/04):	166	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity	(12/31/04):	166	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31,	/04:	160	Average Daily Census:	161

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	2/31/04)	Length of Stay (12/31/04)	%
Home Health Care	No	Primary Diagnosis	<b>%</b>	Age Groups	%	Less Than 1 Year	35.0
Supp. Home Care-Personal Care	No					1 - 4 Years	41.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years	23.8
Day Services	No	Mental Illness (Org./Psy)	28.1	65 - 74	5.0		
Respite Care	Yes	Mental Illness (Other)	0.6	75 - 84	30.0		100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	50.0	******************	******
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.6	95 & Over	15.0	Full-Time Equivalen	t
Congregate Meals	Yes	Cancer	2.5			Nursing Staff per 100 Re	sidents
Home Delivered Meals	No	Fractures	3.8		100.0	(12/31/04)	
Other Meals	No	Cardiovascular	25.6	65 & Over	100.0		
Transportation	No	Cerebrovascular	14.4			RNs	11.2
Referral Service	No	Diabetes	1.9	Gender	%	LPNs	10.9
Other Services	No	Respiratory	0.6			Nursing Assistants,	
Provide Day Programming for	ĺ	Other Medical Conditions	21.9	Male	23.8	Aides, & Orderlies	44.5
Mentally Ill	No			Female	76.3		
Provide Day Programming for	j		100.0	İ			
Developmentally Disabled	No				100.0		

## Method of Reimbursement

		edicare itle 18			edicaid itle 19		Other		Private Pay		Family Care			Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	4	4.3	148	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	2.5
Skilled Care	16	100.0	374	83	90.2	126	0	0.0	0	47	90.4	206	0	0.0	0	0	0.0	0	146	91.3
Intermediate				5	5.4	105	0	0.0	0	5	9.6	187	0	0.0	0	0	0.0	0	10	6.3
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	-	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	16	100.0		92	100.0		0	0.0		52	100.0		0	0.0		0	0.0		160	100.0

CLEMENT MANOR HLTH CARE CENTER

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/04
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of		Number of
Private Home/No Home Health	9.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent 1	Residents
Private Home/With Home Health	0.0	Bathing	8.8		67.5	23.8	160
Other Nursing Homes	12.8	Dressing	8.1		71.9	20.0	160
Acute Care Hospitals	69.9	Transferring	19.4		60.0	20.6	160
Psych. HospMR/DD Facilities	0.0	Toilet Use	18.8		60.6	20.6	160
Rehabilitation Hospitals	0.0	Eating	65.0		17.5	17.5	160
Other Locations	8.3	******	******	*****	*****	*******	*****
Total Number of Admissions	133	Continence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	8.8	Receiving Resp	iratory Care	2.5
Private Home/No Home Health	16.9	Occ/Freq. Incontiner	nt of Bladder	61.3	Receiving Trac	heostomy Care	0.6
Private Home/With Home Health	4.6	Occ/Freq. Incontine	nt of Bowel	40.0	Receiving Suct	ioning	0.6
Other Nursing Homes	2.3				Receiving Osto	my Care	0.6
Acute Care Hospitals	12.3	Mobility			Receiving Tube	Feeding	5.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	4.4	Receiving Mech	anically Altered Diets	30.6
Rehabilitation Hospitals	0.0				_	-	
Other Locations	18.5	Skin Care			Other Resident C	haracteristics	
Deaths	45.4	With Pressure Sores		4.4	Have Advance D	irectives	100.0
Total Number of Discharges		With Rashes		0.0	Medications		
(Including Deaths)	130				Receiving Psyc	hoactive Drugs	63.8

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Non	profit	100	-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.0	87.4	1.11	86.5	1.12	87.3	1.11	88.8	1.09
Current Residents from In-County	96.9	86.8	1.12	87.0	1.11	85.8	1.13	77.4	1.25
Admissions from In-County, Still Residing	40.6	21.8	1.86	18.9	2.15	20.1	2.02	19.4	2.09
Admissions/Average Daily Census	82.6	159.1	0.52	188.2	0.44	173.5	0.48	146.5	0.56
Discharges/Average Daily Census	80.7	159.6	0.51	190.4	0.42	174.4	0.46	148.0	0.55
Discharges To Private Residence/Average Daily Census	17.4	63.2	0.27	77.5	0.22	70.3	0.25	66.9	0.26
Residents Receiving Skilled Care	93.8	96.1	0.98	95.9	0.98	95.8	0.98	89.9	1.04
Residents Aged 65 and Older	100	96.5	1.04	90.5	1.10	90.7	1.10	87.9	1.14
Title 19 (Medicaid) Funded Residents	57.5	50.4	1.14	56.3	1.02	56.7	1.01	66.1	0.87
Private Pay Funded Residents	32.5	33.2	0.98	22.2	1.46	23.3	1.39	20.6	1.58
Developmentally Disabled Residents	0.0	0.5	0.00	1.1	0.00	0.9	0.00	6.0	0.00
Mentally Ill Residents	28.8	33.9	0.85	29.0	0.99	32.5	0.88	33.6	0.86
General Medical Service Residents	21.9	26.1	0.84	25.4	0.86	24.0	0.91	21.1	1.04
Impaired ADL (Mean)	48.4	51.2	0.94	52.6	0.92	51.7	0.94	49.4	0.98
Psychological Problems	63.8	62.3	1.02	55.4	1.15	56.2	1.13	57.7	1.10
Nursing Care Required (Mean)	5.5	7.1	0.79	7.7	0.72	7.7	0.72	7.4	0.75